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MAY 2 8 2002

et No.: 042390P12181XC Technology Center 2100 **Patent** In re the Application of: Kavanaugh (inventor(s)) Application No.: 09/834,167 Filed: April 12, 2001 Wallet for Personal Information Device For: (title) ASSISTANT COMMISSIONER FOR PATENTS Washington, D.C. 20231 SIR: Transmitted herewith is an Amendment for the above application. Small entity status of this application under 37 C.F.R. §§ 1.9 and 1.27 has been established by a verified statement previously submitted. A verified statement to establish small entity status under 37 C.F.R. §§ 1.9 and 1.27 is enclosed. No additional fee is required. The fee has been calculated as shown below: OTHER THAN A (Col. 1) (Col. 2) (Col. 3) **SMALL ENTITY SMALL ENTITY** Claims Highest No. Remaining Previously Present Additional Additional After Amd. Paid For Rate Extra Rate Fee Fee Total 26 Minus **28 \$ 0 X9 X18 \$ (_ Claims Indep. ***3 3 Minus X42 | \$ 0 X84 \$ Claims **First Presentation of Multiple** +140 \$ +280 \$ Dependent Claim(s) If the entry in Col. 1 is less than the entry In Col. 2, Total Total \$0.00 write "0" in Col. 3. Add. Fee Add. Fee If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space. If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed. I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231 April Worley

Docket No. 042390.P12181XC Application No. 09/834,167

Name of Person Mailing Correspondence

	A check in the amount of \$	is attached for presen	tation of additional claim(s).					
	Applicant(s) hereby Petition(s) for a	n Extension of Time of	month(s) pursuant to					
	37 C.F.R. § 1.136(a).		.,,					
	A check for \$ is attac	ched for processing fees unde	r 37 C.F.R. § 1.17.					
	Please charge my Deposit Account	No. <u>02-2666</u> the amount of \$_	•					
	A duplicate copy of this sheet is e	enclosed.						
X	The Commissioner of Patents and T	rademarks is hereby authoriz	ed to charge payment of the					
	following fees associated with this co	ommunication or credit any ov	verpayment to Deposit Account					
	No. 02-2666 (a duplicate copy of t	his sheet is enclosed):						
	X Any additional filing fees required under 37 C.F.R. § 1.16 for presentation of							
	extra claims.		·					
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Date:	3//02	777	/					
	,	Michael A. DeSand	ctis '					
	Ishire Boulevard							
Seventh F		Reg. No. <u>39,957</u>						
_	les, California 90025							
(303)740	-1980							



PTO/SB/17(09-00)

Approved for use through 10/31/2002. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE uction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

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				TOTAL AMOUNT OF PAYMENT (\$)	_7	40.00	_			
Complete if Known: Application No. 09/834,167 Filing Date April 12, 2001 First Named Inventor Kavanaugh						RECEIVED				
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<u>Large</u>	Entity	<u>Small</u>	Entity			Sig	natun			Date
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Code	(\$)	Code	(\$)	Fee Description				Fee Paid	d	
101 106	740 330	201 206	370 165	Utility application filing fee					_	
107	510	207	255	Design application filing fee Plant filing fee				-		
108	740	208	233 370	Reissue filing fee					_	
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					SUB	TOTAL (1)	\$ <u>0.</u>	00	_	
2.	EXTRA (CLAIM	<u>FEES</u>	Extra Claims		Fee from below		Fee Paid	d	
Total	Claims	26		-28** = 0	X	19.00	_	0.00	_	
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Fee	Fee	Fee	Fee							
Code	(\$)	Code	(\$)	Fee Description						
103	18	203	9	Claims in excess of 20						
102	84	202	42	Independent claims in excess of 3						
104	280	204	140	Multiple dependent claim, if not pai						
109 110	84 18	209 210	42 9	**Reissue independent claims over						
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					ŞU	BTOTAL (2	2) \$	0.00		

FEE CALCULATION (continued) 3. **ADDITIONAL FEES** Small Entity Large Entity Fee Fee Fee Fee Code Code (\$) (\$) **Fee Description** Fee Paid 105 130 205 65 Surcharge - late filing fee or oath 127 50 227 25 Surcharge - late provisional filing fee or cover sheet 139 139 130 130 Non-English specification 147 2,520 147 2,520 For filing a request for ex-parte reexamination 099 8,800 099 8,800 Request for inter partes reexamination 112 920* 112 920* Requesting publication of SIR prior to **Examiner action** 113 1,840* 113 1,840* Requesting publication of SIR after **Examiner action** 115 110 215 55 Extension for response within first month 116 400 216 200 Extension for response within second month Extension for response within third month 117 920 217 460 Extension for response within fourth month 118 1.440 218 720 128 1.960 228 980 Extension for response within fifth month 119 320 219 160 **Notice of Appeal** 120 320 220 Filing a brief in support of an appeal 160 121 280 221 140 Request for oral hearing 138 138 1,510 1,510 Petition to institute a public use proceeding 140 110 240 55 Petition to revive unavoidably abandoned application or unavoidably delayed payment of issue fee 141 1,280 241 640 Petition to revive unintentionally abandoned application or unintentionally delayed payment of issue fee 142 1,280 242 640 Utility issue fee (or reissue) 143 460 243 230 Design issue fee 144 620 244 310 Plant issue fee 122 130 122 130 **Petitions to the Commissioner** 123 Petitions related to provisional applications 50 123 50 126 180 126 180 Submission of Information Disclosure Stmt 581 40 581 40 Recording each patent assignment per property (times number of properties) 146 740 246 370 For filing a submission after final rejection (see 37 CFR 1.129(a)) 149 740 249 370 For each additional invention to be examined (see 37 CFR 1.129(b)) 179 740 279 370 Request for Continued Examination (RCE) 740.00 169 900 169 900 Request for expedited examination of a design application Other fee (specify) Other fee (specify) SUBTOTAL (3) \$ 740.00 *Reduced by Basic Filing Fee Paid SUBMITTED BY: Michael A **DeSanctis** Typed or Printed Name: ` Signature: Date: **Reg. Number:** 39,957 **Telephone Number: 303-740-1980**

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